

# COLORADO WING PILOT ROSTER UPDATE

**ACTION:** (Check only 1)

<input type="checkbox"/> <b>Addition</b> (Specify all information possible)	<input type="checkbox"/> <b>Change</b> (Specify only the information that has changed)	<input type="checkbox"/> <b>Deletion</b> (specify only the unit, member name, and CAP Serial Number)
--	---	---

## MEMBER DATA

NAME:	GRADE:	CAPSN	EXPIRATION DATE
UNIT	CHARTER # RMR-CO-	UNIT HOLDING FLIGHT RECORDS (IF DIFFERENT)	
HOME PHONE	PAGER NUMBER	E-MAIL ADDRESS	

## PILOT DATA

CERTIFICATE NUMBER:	<input type="checkbox"/> Private	<input type="checkbox"/> Commercial	<input type="checkbox"/> ATP
RATINGS:	<input type="checkbox"/> Multi-Engine	<input type="checkbox"/> Instrument	
CAP PILOT RATING:	<input type="checkbox"/> Pilot	<input type="checkbox"/> Senior Pilot	<input type="checkbox"/> Command Pilot
# FAA WINGS:	# HOURS PIC:	Date Of Birth (If under 40)	

## ACCOMPLISHMENT DATA

FOR THE FOLLOWING USE THE **ACCOMPLISHMENT DATE** NOT THE EXPIRATION DATE

ACCOMPLISHMENT	DATE	ACCOMPLISHMENT	DATE
BFR		MEDICAL	
MEDICAL CLASS		STATEMENT OF UNDERSTANDING	
COWGF 9 (MTN CHECK)		C-182 CAPF 5	
CAPF 5 WITH NIGHT ENDORSEMENT		T-182 CAPF 5	
CAPF 5 WITH IFR ENDORSEMENT		TR-182 CAPF 5	
CAPF 5 WITH CADET ORIENTATION		ORIENTATION PILOT WING ORDERS	
CAPF 5 CHECK PILOT ENDORSEMENT		CHIEF CHECK PILOT	
MISSION CHECK PILOT		INSTRUCTOR PILOT	
CHECK PILOT WING ORDERS		CAPF 101 APPROVAL~ FOR TRANSPORT PILOT	
CAPF 91 FLATLAND ENDORSEMENT		CAPF 91 MOUNTAIN ENDORSEMENT	
CAPF 5 FOR OTHER AIRCRAFT DATE		OTHER AIRCRAFT TYPE	

**Note: This information must reflect the information that is currently in the Squadron Pilot Records.**

**Submitted by (Unit Commander, Operations Officer, or Flight Operations Officer):**

Type or Print Name, Rank, and Title:	Signature	Date:
--------------------------------------	-----------	-------